



#### **TCE:** Disposition and Genetic Effects

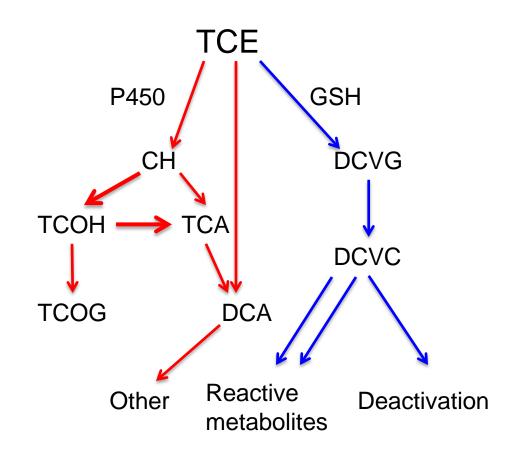
- Disposition
  - Absorption, distribution, excretion
  - Metabolism
- Genetic and related effects
  - TCE
  - Metabolites

### Absorption, distribution and excretion

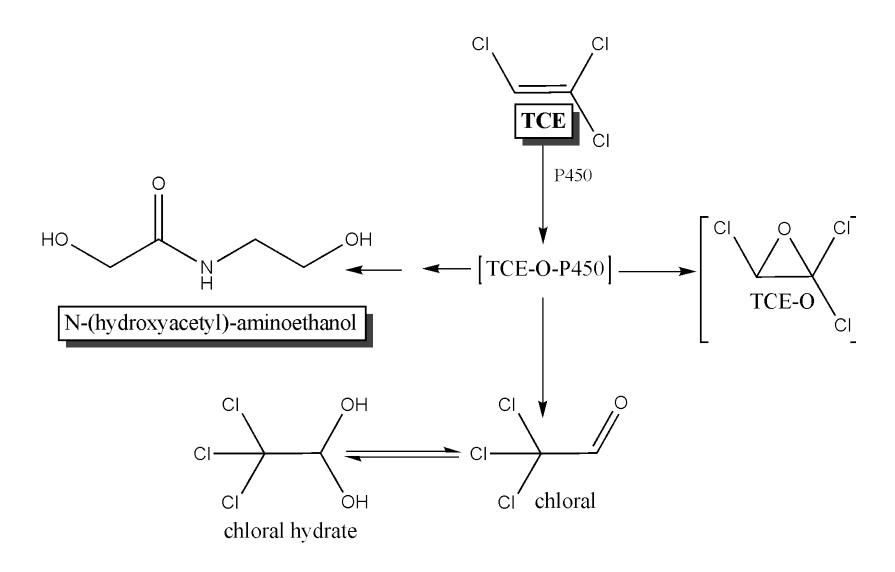
- Small lipophilic molecule
- Well absorbed from all routes
- Rapidly distributed to all tissues
  - Determined by blood:tissue partition coefficients
  - Highest concentrations in adipose tissue
- Excretion
  - Unchanged or CO<sub>2</sub> in exhaled breath
  - Metabolites in urine
  - Feces, sweat, saliva, milk

## TCE metabolism is complex

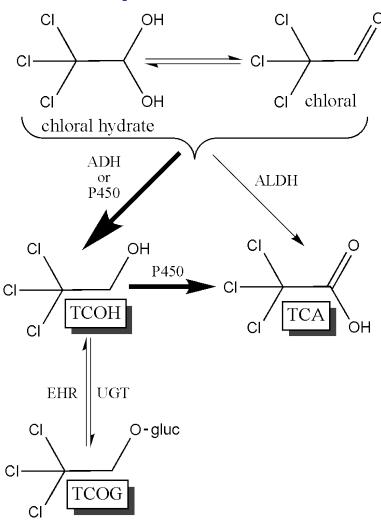
- Two key pathways
  - P450 (liver)
    - Dominant pathway
    - Several stable metabolites
  - GSH (liver/kidney)
    - Many reactive metabolites
    - One urinary metabolite
    - Flux uncertain (variable and can be altered)
  - Qualitatively similar in rodents and humans



# TCE metabolism: Oxidation (initial reactions)



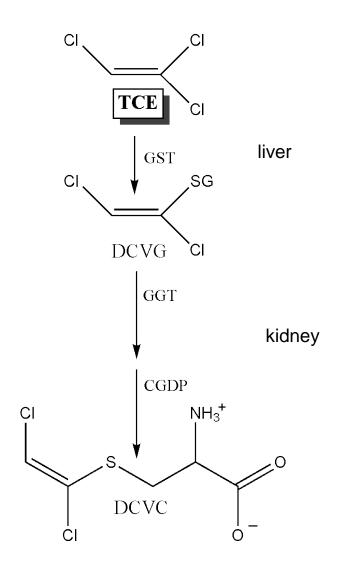
# TCE metabolism: Chloral pathway (primary urinary metabolites)



TCE Metabolism: TCE-oxide pathway (minor

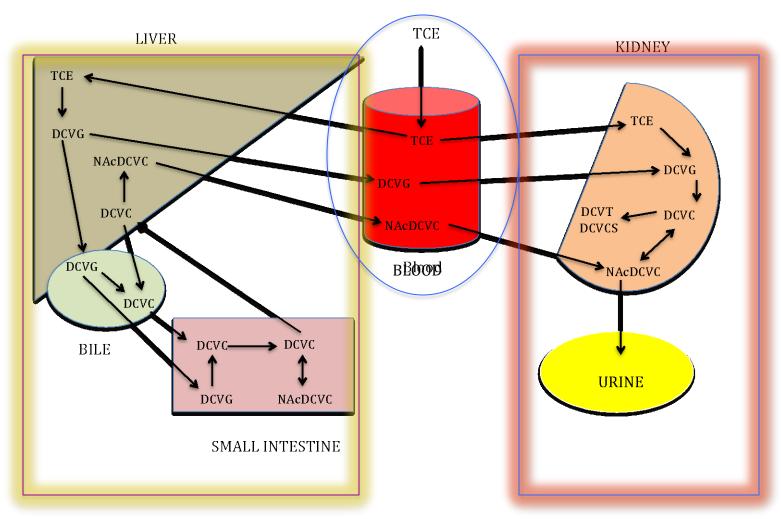
urinary metabolites) TCE-O DCAC CI CI CI CI DCA **MCA** ΉO GST-zeta glyoxylic acid ΗO HO

# TCE Metabolism: GSH conjugation



# TCE Metabolism: DCVC pathways (kidney)

# **TCE GSH Conjugates: Interorgan transport**

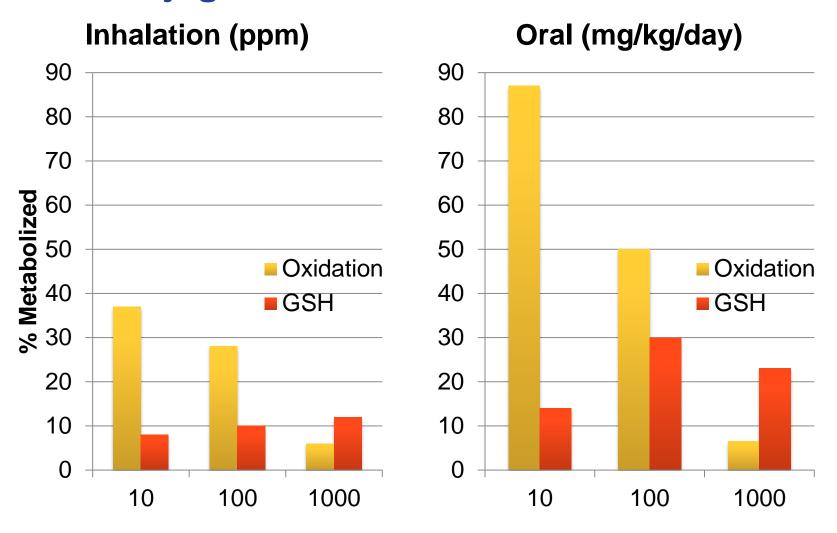


Adapted from Lash et al. 2014

## TCE: GSH pathway is important

- Produces several reactive metabolites
- Flux estimates uncertain but may be higher than previously thought
  - Estimates of (TCA + TCOH)/NAcDCVC ≥ 1000:1 but NAcDCVC in urine is a small fraction of total flux
  - DCVG blood levels similar to TCA/TCOH in human volunteers
  - In vitro Km and Vmax values for oxidation and conjugation in human hepatocytes and subcellular fractions show overlap
- Genetic polymorphisms in GSTs/P450s/other
- Exposure to P450 inducers/inhibitors
  - Impact likely greater at high substrate concentrations

# PBPK model predictions TCE oxidation vs. GSH conjugation - humans



## TCE/metabolites cause genetic effects in vitro

Endpoint	TCE	СН	TCA	DCA	DCVG/DC VC
Mutations	(-)	+	(-)	(+)	<b>+</b> b
Aneuploidy	+	+	NT	-	NT
DNA strand breaks	<b>+</b> <sup>a</sup>	_	(-)	-	<b>+</b> c
UDS or DNA damage	(-)	+	_	+	<b>+</b> c
Clastogenic effects	<b>+</b> <sup>a</sup>	+	+	±	_
Cell transformation	±	+	NT	NT	<b>+</b> c
DNA/protein binding	+	<u> </u>	NT	NT	+

<sup>-</sup> = negative, (-) = probably negative,  $\pm$  = mixed results, (+) = probably positive,  $\pm$  = positive; NT = not tested

<sup>&</sup>lt;sup>a</sup> Included strand breaks and MN in primary cultures of rat and human kidney cells and human HepG2 cells

b Effects increased with a kidney-derived activation system and diminished with β-lyase inhibitor

<sup>&</sup>lt;sup>c</sup> Included effects in rodent kidney cells

## TCE/metabolites cause genetic effects in vivo

Endpoint	TCE	СН	TCA	DCA	DCVG/DC VC
Mutations	_	NT	NT	+	NT
Aneuploidy	NT	± <sup>a</sup>	NT	NT	NT
DNA strand breaks	<b>±</b> b	± <sup>c</sup>	±c,d	(-)	± <sup>e</sup>
Clastogenic effects	(+) <sup>f</sup>	<b>+</b> g	+	(-)	NT
DNA/protein binding	±	_	+	NT	+

<sup>-</sup> = negative, (-) = probably negative,  $\pm$  = mixed results, (+) = probably positive, + = positive; NT = not tested

<sup>&</sup>lt;sup>a</sup> Positive in 2 of 4 studies in mouse blood or sperm

<sup>&</sup>lt;sup>b</sup> Generally positive in liver in rats/mice, kidney in mice, inconsistent findings in rat kidney

<sup>&</sup>lt;sup>c</sup> Positive in one study in liver (rats/mice) but not in another

d Also positive in human HepG2 cells

<sup>&</sup>lt;sup>e</sup> Positive in rat proximal tubule cells (10 mg/kg at 2 hr); negative at 16 hr and at 1 mg/kg. Positive in male albino rabbit *in vivo* and in rabbit isolated kidney and proximal tubules (*ex vivo*).

f Included MN in rat kidney

<sup>&</sup>lt;sup>g</sup> Included MN and SCE in peripheral blood lymphocytes of treated infant.

### TCE Disposition and Genetic Effects: Summary

- Well absorbed from all routes and rapid distribution
- Highest tissue concentrations in fat
- Excreted unchanged in exhaled breath and as urinary metabolites
- Complex metabolism
  - Similar in humans and rodents
  - P450 pathway: TCA, TCOH, TCOG (liver)
  - GSH pathway: DCVC and other reactive metabolites (kidney)
- Genetic effects attributed to metabolites
  - Mutations
  - DNA and chromosome damage (MN)

# TCE Disposition and Genetic Effects: Reviewer's questions/discussion

- Comment on whether the information on ADME and toxicokinetics is clear, technically correct, and objectively presented.
  - Identify any information that should be added or deleted.
- Comment on whether the genotoxicity data presented in the cancer evaluation component for TCE are clear, technically correct, and objectively presented.
  - Provide any scientific criticisms of the NTP's interpretation and application of the genotoxicity data from the cited studies for assessing effects of TCE.